

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>7-14-05</u>		2 Serial/Patent # <u>10/519429</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing		1	<u>12/22/04</u>	\$ <u>100</u>
Amendment				\$
Extension of Time				\$
Notice of Appeal/Appeal				\$
Petition				\$
Issue				\$
Cert of Correction/Terminal Disc.				\$
Maintenance				\$
Assignment				\$
Other				\$
		7 TOTAL AMOUNT OF REFUND	\$ <u>100</u>	
8 TO BE REFUNDED BY:				
10 REASON:		<input type="checkbox"/> Treasury Check <input checked="" type="checkbox"/> Credit Deposit A/C #: <u>1 3 -- 4500</u>		
<input checked="" type="checkbox"/> Overpayment				
<input type="checkbox"/> Duplicate Payment				
<input type="checkbox"/> No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>A Johnson</u>		TITLE: <u>paralegal</u>		
SIGNATURE: <u>A Johnson PCT</u>		PHONE: <u>308-9140</u>		
OFFICE: *****				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: _____		DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B